
State: Illinois **Filing Company:** Great Divide Insurance Company
TOI/Sub-TOI: 11.1 Med Mal-Occurrence Only/11.1019 Optometry
Product Name: Optometrists Professional Liability Insurance
Project Name/Number: AOA-0003 (2/12)/04-12 Original

Filing at a Glance

Company: Great Divide Insurance Company
Product Name: Optometrists Professional Liability Insurance
State: Illinois
TOI: 11.1 Med Mal-Occurrence Only
Sub-TOI: 11.1019 Optometry
Filing Type: Rate/Rule
Date Submitted: 06/28/2012
SERFF Tr Num: MNLM-128293060
SERFF Status: Closed-Filed
State Tr Num: MNLM-128293060
State Status:
Co Tr Num: AOA-040112-R

Effective Date: 10/01/2012
Requested (New):
Effective Date: 10/01/2012
Requested (Renewal):
Author(s): Debbie Smith
Reviewer(s): Gayle Neuman (primary)
Disposition Date: 10/02/2012
Disposition Status: Filed
Effective Date (New):
Effective Date (Renewal):

State Filing Description:
routed 7/24/12

State: Illinois **Filing Company:** Great Divide Insurance Company
TOI/Sub-TOI: 11.1 Med Mal-Occurrence Only/11.1019 Optometry
Product Name: Optometrists Professional Liability Insurance
Project Name/Number: AOA-0003 (2/12)/04-12 Original

General Information

Project Name: AOA-0003 (2/12) Status of Filing in Domicile: Pending
Project Number: 04-12 Original Domicile Status Comments:
Reference Organization: N/A Reference Number: N/A
Reference Title: N/A Advisory Org. Circular: N/A
Filing Status Changed: 10/02/2012
State Status Changed: Deemer Date:
Created By: Debbie Smith Submitted By: Debbie Smith
Corresponding Filing Tracking Number: AOA-040112-F

Filing Description:

Great Divide Insurance Company is submitting the rates and rules portion of its new Optometrists Professional Liability Insurance program.

This occurrence product provides medical malpractice and general liability coverage for optometrists.

Please note the related forms are being submitted separately.

Company and Contact

Filing Contact Information

Debbie Smith, Senior Compliance Analyst dsmith@monitorliability.com
2850 West Golf Road 847-806-6590 [Phone] 643 [Ext]
Suite 800 847-806-6592 [FAX]
Rolling Meadows, IL 60008

Filing Company Information

Great Divide Insurance Company CoCode: 25224 State of Domicile: North
c/o Monitor Liability Managers, Group Code: 98 Dakota
LLC Group Name: W. R. Berkley Group Company Type:
2850 West Golf Road FEIN Number: 45-0397186 State ID Number:
Ste. 800
Rolling Meadows, IL 60008
(847) 806-6590 ext. [Phone]

Filing Fees

Fee Required? No
Retaliatory? No
Fee Explanation:
Per Company: Yes

Company	Amount	Date Processed	Transaction #
Great Divide Insurance Company	\$0.00	06/28/2012	

State:	Illinois	Filing Company:	Great Divide Insurance Company
TOI/Sub-TOI:	11.1 Med Mal-Occurrence Only/11.1019 Optometry		
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State Specific

Refer to our checklists prior to submitting filing (http://www.idfpr.com/DOI/Prop_Cas_IS3_Checklists/IS3_Checklists.htm): Yes
Refer to our updated (04/06/2007) SERFF General Instructions prior to submitting filing. They have been updated to clarify what rates and rules are required to be filed as well as what rates and rules are not required to be filed. Also, the "Product Name" is the Filing Title and not the Project Number.: Yes

NO RATES and/or RULES ARE REQUIRED TO BE FILED FOR LINES OF COVERAGE SUCH AS COMMERCIAL AUTO (except taxicabs), BURGLARY AND THEFT, GLASS, FIDELITY, SURETY, COMMERCIAL GENERAL LIABILITY, CROP HAIL, COMMERCIAL PROPERTY, DIRECTORS AND OFFICERS, ERRORS AND OMISSIONS, COMMERCIAL MULTI PERIL just to mention a few. However, a Summary Sheet (RF-3) is required to be filed. Please refer to the State Specific Field below for what rates/rules are required to be filed and to our checklists for specific statutes, regulations, etc. :

http://insurance.illinois.gov/Prop_Cas_IS3_Checklists/IS3_Checklists.asp .: Yes

Medical Malpractice rates/rules may now be submitted using SERFF effective January 1, 2012.: Yes

The only rates and/or rules that are required to be filed are Homeowners, Mobile Homeowners, Dwelling Fire and Allied Lines, Workers' Compensation, Liquor Liability, Private Passenger Automobiles, Taxicabs, Motorcycles and Group Inland Marine Insurance which only applies to insurance involving personal property owned by, being purchased by or pledged as collateral by individuals, and not used in any business, trade or profession per Regulation Part 2302 which says in part, "each company shall file with the Director of Insurance each rate, rule and minimum premium before it is used in the State of Illinois.": N/A

When selecting a form filing type for a multiple form filing, use the dominant type from these choices: APP - application; CER - certificate; COF - coverage form; DPS - declaration page; END - endorsement; POJ - policy jacket; ORG - Companies adopting an Advisory or Rating Organization's filing. Example: If you are submitting a policy as well as endorsements, a declaration page and an application, you would select "POL" for policy.: N/A

SERFF Tracking #:	MNLM-128293060	State Tracking #:	MNLM-128293060	Company Tracking #:	AOA-040112-R
State:	Illinois	Filing Company:	Great Divide Insurance Company		
TOI/Sub-TOI:	11.1 Med Mal-Occurrence Only/11.1019 Optometry				
Product Name:	Optometrists Professional Liability Insurance				
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Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Filed	Gayle Neuman	10/02/2012	10/02/2012

Objection Letters and Response Letters

Objection Letters

Status	Created By	Created On	Date Submitted
Pending Industry Response	Gayle Neuman	07/19/2012	07/19/2012
Pending Industry Response	Gayle Neuman	07/19/2012	07/19/2012

Response Letters

Responded By	Created On	Date Submitted
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Filing Notes

Subject	Note Type	Created By	Created On	Date Submitted
Effective Date	Note To Reviewer	Debbie Smith	10/01/2012	10/01/2012
effective date	Note To Filer	Gayle Neuman	10/01/2012	10/01/2012
filing routing	Reviewer Note	Gayle Neuman	10/02/2012	

State:	Illinois	Filing Company:	Great Divide Insurance Company
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Disposition

Disposition Date: 10/02/2012
Effective Date (New): 10/01/2012
Effective Date (Renewal): 10/01/2012
Status: Filed
Comment:

Company Name:	Overall % Indicated Change:	Overall % Rate Impact:	Written Premium Change for this Program:	# of Policy Holders Affected for this Program:	Written Premium for this Program:	Maximum % Change (where req'd):	Minimum % Change (where req'd):
Great Divide Insurance Company	%	0.000%	\$0	0	\$0	%	%

State: Illinois **Filing Company:** Great Divide Insurance Company
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Objection Letter

Objection Letter Status	Pending Industry Response
Objection Letter Date	07/19/2012
Submitted Date	07/19/2012
Respond By Date	07/26/2012

Dear Debbie Smith,

Introduction:

This is to acknowledge receipt of your filing. Your submission is not acceptable for filing in Illinois due to the following reasons:

Please address the second listing on the previous objection letter.

Conclusion:

Sign up to get e-mail notification for updates to the Department's website. <http://insurance.illinois.gov/RSS/>

Please refer to the appropriate Property Casualty IS3 Review Requirements Checklist before submitting any filing. The checklists are available at the Department's Web site or at the following link:

http://insurance.illinois.gov/Prop_Cas_IS3_Checklists/IS3_Checklists.asp

Please submit compliant form(s) no later than the date shown above or the entire filing may be disapproved. Please be advised that when the Director disapproves the form(s) you must immediately cease using the form(s) in Illinois.

Please give this matter your immediate attention. If you have any question regarding this filing please feel free to contact me.

Sincerely,

Gayle Neuman

State: Illinois **Filing Company:** Great Divide Insurance Company
TOI/Sub-TOI: 11.1 Med Mal-Occurrence Only/11.1019 Optometry
Product Name: Optometrists Professional Liability Insurance
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Response Letter

Response Letter Status	Submitted to State
Response Letter Date	07/23/2012
Submitted Date	07/23/2012

Dear Gayle Neuman,

Introduction:

In response to your objection of July 19, 2012, please accept the following:

Response 1

Comments:

Reference to Occurrence Coverage has been added in the header of the form, along with a statement in Item VII - Coverages that reiterates that coverages are written on an occurrence basis.

This is to confirm that the rating plan does not include schedule rating, deductible discounts or payment plans. Payment by credit card is offered to each applicant by the broker.

Changed Items:

No Supporting Documents changed.

No Form Schedule items changed.

No Rate/Rule Schedule items changed.

Conclusion:

Sincerely,

Debbie Smith

State: Illinois **Filing Company:** Great Divide Insurance Company
TOI/Sub-TOI: 11.1 Med Mal-Occurrence Only/11.1019 Optometry
Product Name: Optometrists Professional Liability Insurance
Project Name/Number: AOA-0003 (2/12)/04-12 Original

Objection Letter

Objection Letter Status	Pending Industry Response
Objection Letter Date	07/19/2012
Submitted Date	07/19/2012
Respond By Date	07/31/2012

Dear Debbie Smith,

Introduction:

This is to acknowledge receipt of your filing. Your submission is not acceptable for filing in Illinois due to the following reasons:

Please indicate if your company has a plan for the gathering of statistics or the reporting of statistics to statistical agencies? If yes, what stat agency is being used?

The manual should indicate that the rates provided are occurrence rates. Please confirm that no schedule rating plan, deductible discount plan or premium payment plan is offered.

Conclusion:

Sign up to get e-mail notification for updates to the Department's website. <http://insurance.illinois.gov/RSS/>

Please refer to the appropriate Property Casualty IS3 Review Requirements Checklist before submitting any filing. The checklists are available at the Department's Web site or at the following link:

http://insurance.illinois.gov/Prop_Cas_IS3_Checklists/IS3_Checklists.asp

Please submit compliant form(s) no later than the date shown above or the entire filing may be disapproved. Please be advised that when the Director disapproves the form(s) you must immediately cease using the form(s) in Illinois.

Please give this matter your immediate attention. If you have any question regarding this filing please feel free to contact me.

Sincerely,

Gayle Neuman

State: Illinois **Filing Company:** Great Divide Insurance Company
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Product Name: Optometrists Professional Liability Insurance
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Response Letter

Response Letter Status	Submitted to State
Response Letter Date	07/19/2012
Submitted Date	07/19/2012

Dear Gayle Neuman,

Introduction:

Thank you for your letter regarding this filing.

Response 1

Comments:

The stat agent for this program is Independent Statistical Services

Changed Items:

No Supporting Documents changed.

No Form Schedule items changed.

No Rate/Rule Schedule items changed.

Conclusion:

Sincerely,

Debbie Smith

State: Illinois **Filing Company:** Great Divide Insurance Company
TOI/Sub-TOI: 11.1 Med Mal-Occurrence Only/11.1019 Optometry
Product Name: Optometrists Professional Liability Insurance
Project Name/Number: AOA-0003 (2/12)/04-12 Original

Note To Reviewer

Created By:

Debbie Smith on 10/01/2012 03:24 PM

Last Edited By:

Gayle Neuman

Submitted On:

10/02/2012 08:58 AM

Subject:

Effective Date

Comments:

Please make the effective date of this filing October 1, 2012. I sent a post submission update via SERFF revising the requested effective date, too. Thank you.

State: Illinois **Filing Company:** Great Divide Insurance Company
TOI/Sub-TOI: 11.1 Med Mal-Occurrence Only/11.1019 Optometry
Product Name: Optometrists Professional Liability Insurance
Project Name/Number: AOA-0003 (2/12)/04-12 Original

Note To Filer

Created By:

Gayle Neuman on 10/01/2012 01:50 PM

Last Edited By:

Gayle Neuman

Submitted On:

10/02/2012 08:58 AM

Subject:

effective date

Comments:

The Department of Insurance has now completed its review of the filing referenced above. The Director's review of the filing was completed on October 1, 2012. Originally, Great Divide requested the filing be effective on approval. What effective date do you request for the filing? Your prompt response is appreciated.

State:	Illinois	Filing Company:	Great Divide Insurance Company
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Product Name:	Optometrists Professional Liability Insurance		
Project Name/Number:	AOA-0003 (2/12)/04-12 Original		

Reviewer Note

Created By:

Gayle Neuman on 10/02/2012 08:28 AM

Last Edited By:

Gayle Neuman

Submitted On:

10/02/2012 08:58 AM

Subject:

filing routing

Comments:

During routing, the attached was added.

GREAT DIVIDE INSURANCE COMPANY

Optometrists Professional Liability

Illinois Certification for Medical Malpractice Rates

(215 ILCS 5/155.18)(5) states that medical liability rates shall be certified in such filing by an officer of the company and a qualified actuary that the company's rates are based on sound actuarial principles and are not inconsistent with the company's experience.

I, Janet L. Shemanske, Vice President & Secretary, of Great Divide Insurance Company (the "Company"), am authorized to certify on behalf of the Company making this filing that the Company's rates are based on sound actuarial principles and are not inconsistent with the Company's experience. Optometrists Professional Liability is a new program for the Company with rates comparable to those of other insurance carriers writing in the state that have been developed using sound actuarial principles.

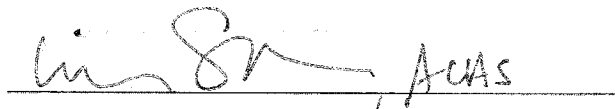
I, Linda Saunders, ACAS and Executive Actuary of Berkley Select, LLC, an affiliate of the Company, and authorized to act on behalf of the Company, certify that the Company's rates are based on sound actuarial principles and are not inconsistent with the Company's experience. Optometrists Professional Liability is a new program for the Company with rates comparable to those of other insurance carriers writing in the state that have been developed using sound actuarial principles.



Janet L. Shemanske, Vice President & Secretary

8/8/12

Date



Signature and Title of Insurance Company Actuary

8/8/12

Date

State: Illinois **Filing Company:** Great Divide Insurance Company
TOI/Sub-TOI: 11.1 Med Mal-Occurrence Only/11.1019 Optometry
Product Name: Optometrists Professional Liability Insurance
Project Name/Number: AOA-0003 (2/12)/04-12 Original

Post Submission Update Request Processed On 10/02/2012

Status: Allowed
Created By: Debbie Smith
Processed By: Gayle Neuman
Comments:

General Information:

Field Name	Requested Change	Prior Value
Effective Date Requested (New)	10/01/2012	
Effective Date Requested (Renew)	10/01/2012	

State:	Illinois	Filing Company:	Great Divide Insurance Company
TOI/Sub-TOI:	11.1 Med Mal-Occurrence Only/11.1019 Optometry		
Product Name:	Optometrists Professional Liability Insurance		
Project Name/Number:	AOA-0003 (2/12)/04-12 Original		

Rate/Rule Schedule

Item No.	Schedule Item Status	Exhibit Name	Rule # or Page #	Rate Action	Previous State Filing Number	Attachments
1		Optometrists Professional Liability Insurance Rates - AOA (IL) (2-12)	Pages 1-6	New		AOA Rating Plan.pdf
2		Optometrists Professional Liability Insurance Rates - AOA (2-12)	Pages 1-6	New		AOA Rating Plan.pdf

GREAT DIVIDE INSURANCE COMPANY

OPTOMETRISTS PROFESSIONAL LIABILITY INSURANCE PROGRAM

COUNTRYWIDE OCCURRENCE RATES/RULES MANUAL

Part 1 – General Rules

I. APPLICATION OF MANUAL RULES

- A. This manual provides rules, rates, premiums, and classifications and shall govern the writing of Professional Liability policies for Optometrists.
- B. The rules, rates, rating plans, and forms filed on behalf of the Company and not in conflict herewith shall govern in all cases not specifically provided for herein.
- C. Any exceptions to these manual rules are contained in the respective Section or State Rate Page.

II. POLICY TERMS

Policies may be written for a term of one year, and renewed annually thereafter, or as otherwise specified for the respective coverage.

III. WHOLE DOLLAR RULE

In the event the application of any rating procedure applicable in accordance with this manual where the result is not a whole dollar, each rate and premium shall be adjusted as follows:

- A. any amount involving \$.50 or over shall be rounded to the next highest whole dollar amount; or
- B. any amount involving \$.49 or less shall be rounded down to the next lowest whole dollar amount.

IV. ADDITIONAL PREMIUM CHARGES

- A. Prorate all changes requiring additional premium.
- B. Apply the rates and rules that were in effect at the inception date of this policy period. After computing the additional premium, charge the amount applicable from the effective date of the change, even if the policy inception premium was less than the policy writing minimum premium (if applicable).
- C. Waive additional premium of \$10.00 or less (not applicable in KS, NH & WA).

GREAT DIVIDE INSURANCE COMPANY
OPTOMETRISTS PROFESSIONAL LIABILITY INSURANCE PROGRAM
COUNTRYWIDE OCCURRENCE RATES/RULES MANUAL

Part 1 – General Rules

V. RETURN PREMIUM

- A. Deletion of any coverage, other than optional coverages, is not permitted unless the entire policy is canceled.
- B. Compute return premium at the rates used to calculate the policy premium at the inception of this policy period.
- C. Compute return premium pro rata and round in accordance with the Whole Dollar Rule when any coverage or exposure is deleted or an amount of insurance is reduced.
- D. Waive return premium of \$10.00 or less (not applicable in KS, NH & WA). Grant any return premium due if requested by the insured. This waiver only applies to cash exchange due on the endorsement effective date.

VI. POLICY CANCELLATIONS

- A. The policy may be canceled flat within 60 days of the effective date. Evidence of such cancellation must be received by the Company within 60 days of such cancellation.
- B. Any cancellation initiated, other than by the insured, after more than 60 days will be canceled pro- rata.
- C. Cancellation initiated by the insured will be canceled pro-rata less a penalty of 10% (7.5% for AK) unless coverage is concurrently rewritten by the Company, in which case no penalty shall be applied.

VII. COVERAGES

Coverages under this policy shall be as described in the respective Coverage Parts. It shall be permissible to attach more than one Coverage Part to the policy. All coverages are written on an Occurrence basis. The following are the combinations of coverages that are available under this policy:

Professional Liability and General Liability
Professional Liability only

Note: General Liability cannot be purchased on a stand-alone basis.

GREAT DIVIDE INSURANCE COMPANY
OPTOMETRISTS PROFESSIONAL LIABILITY INSURANCE PROGRAM
COUNTRYWIDE OCCURRENCE RATES/RULES MANUAL

Part 1 – General Rules

VIII. PREMIUM COMPUTATION

- A. Compute the premium at policy inception using the rules, rates, and rating plans in effect at that time. At each renewal, compute the premium using the rules, rates, and rating plans then in effect.
- B. Prorate the premium when a policy is issued for less than a whole year.
- C. Premiums are calculated as specified for the respective coverage. Premium rounding will be done at the end of the computation process in accordance with the Whole Dollar Rule.

Available coverages under this program are:

- a. Professional Liability:

Premium is computed by multiplying the appropriate rate for each optometrist by the number of insured optometrists. If a separate limit of liability is desired for the entity, the total insured count is increased by one. The sum of these products is the total professional liability premium.

- b. General Liability Premium:

Premium is equal to the applicable rate for the first covered location if only one location is covered. Additional location premium is calculated by multiplication of the rate for additional locations by the number of covered locations less one. The premium is the sum of this product and the first location rate. This calculation is given in the following formula:

$$P = r_1 + [r_2 * (n-1)]$$

Where P is the general liability premium, r_1 , is the first location rate, r_2 , is the additional location rate, and n is the total number of locations. Regardless of the number of locations covered, the limit of liability is shared among all covered locations.

- c. Additional Insured Premium:

Premium is computed by multiplying the applicable rate by the number of additional insureds under the policy.

- d. Policy Premium:

The sum of the premiums developed by rules: a, b. and c. above is the policy premium.

GREAT DIVIDE INSURANCE COMPANY
OPTOMETRISTS PROFESSIONAL LIABILITY INSURANCE PROGRAM
COUNTRYWIDE OCCURRENCE RATES/RULES MANUAL

Part 1 – General Rules

IX. FACTORS OR MULTIPLIERS

Wherever applicable, factors or multipliers are to be applied consecutively and not added together.

A. Additional Limit

Group practices or sole practitioners may purchase a separate limit of liability for the entity. The entity premium is equal to the per optometrist premium.

B. Exposure Reduction

1. Students: Optometry students will pay 50% of the rate for optometrists while they are completing their training or beginning their first year of practice.
2. Second Practice Year: Reduced rates apply to individual optometrists who graduated within one year prior to the policy effective date. The rate for such professionals shall be 75% of the rate shown on the rate page.
3. Part-time Practice: Part-time rates apply to optometrists practicing 20 or fewer hours per week. The part-time rate is 75% of the standard rate for a full-time optometrist.
4. Shared Limits: Group practices may purchase a policy under which the entity and all professionals share the same limit of liability. The standard rate for professionals and the entity will be discounted 25% for this type of arrangement.

The lowest rate for which an insured qualifies will apply.

C. Group Discount

A premium credit is available based on the size of the group when coverage is purchased. All members of the group practice must be insured under the policy to be eligible for the discount. Credits apply as follows:

Groups of 2 – 9 optometrists	4% Credit
Groups of 10 or more optometrists	8% Credit

A group credit is not available to groups that chose to share a limit of liability.

GREAT DIVIDE INSURANCE COMPANY

OPTOMETRISTS PROFESSIONAL LIABILITY INSURANCE PROGRAM

COUNTRYWIDE OCCURRENCE RATES/RULES MANUAL

Part 2 – Rating Rules

I. PROFESSIONAL LIABILITY RATES

Rating Territory Code	Territory Description	\$100K/\$300K	\$250K/\$750K	\$1M/\$3M	\$2M/\$4M
CW1	AL, AK, AZ, AR, DE, GA, HI, ID, IN, IA, KS, KY, ME, MD, MS, MT, NE, NH, NC, ND, OH, OK, OR, RI, SC, SD, TN, UT, VT, VA, WA, WV, WI, WY			\$451	\$528
CW2	CO, MN, MO, NV			\$580	\$679
CW3	CT, DC			\$1,509	\$1,766
CA1	California – excluding Los Angeles County			\$420	\$491
CA2	California – Los Angeles Cty.			\$644	\$754
FL1	Florida – excluding Dade and Broward Counties			\$692	\$810
FL2	Florida – Dade & Broward Cty.			\$1,710	\$2,001
IL1	Illinois – excluding Cook Cty.			\$603	\$705
IL2	Illinois – Cook County			\$932	\$1,091
IN	Indiana – Special Limit for Comp Fund Participants		\$308	\$451	\$528
LA	Louisiana	\$503		\$957	\$1,120
MA1	Massachusetts – excluding Norfolk and Suffolk Counties			\$603	\$705
MA2	Massachusetts – Norfolk and Suffolk Counties			\$858	\$1,004
MI1	Michigan – excluding Wayne Cty.			\$603	\$705
MI2	Michigan – Wayne County			\$1,509	\$1,766
NJ1	New Jersey – excluding Camden, Hudson, Essex, Mercer and Union Counties			\$540	\$632
NJ2	New Jersey – Camden, Hudson, Essex, Mercer & Union Counties			\$858	\$1004
NM	New Mexico - All			\$420	\$491
NY1	New York – excluding Bronx, Brooklyn, Manhattan, Queens, Staten Island, Nassau & Suffolk			\$420	\$491
NY2	New York – Bronx, Brooklyn, Manhattan, Queens, Staten Island, Nassau & Suffolk			\$1,050	\$1229
PA1	Pennsylvania – excluding Philadelphia County			\$540	\$632
PA2	Pennsylvania – Philadelphia Cty.			\$858	\$1,004
TX1	Texas – except Dallas & Harris			\$603	\$705
TX2	Texas – Dallas & Harris Cty.			\$858	\$1004
VA	Special Limits \$2M/\$6M* - \$731			\$451	\$528

GREAT DIVIDE INSURANCE COMPANY

OPTOMETRISTS PROFESSIONAL LIABILITY INSURANCE PROGRAM

COUNTRYWIDE OCCURRENCE RATES/RULES MANUAL

II. OPTIONAL COVERAGES

	\$100K/\$300K	\$200K/\$600K	\$50K/\$1M	\$1M/\$3M	\$2M/\$4M
Additional Insureds PL	\$105	\$111	\$129	\$156	\$183
General Liability	\$80	\$85	\$100	\$120	\$140
Additional Locations	\$34	\$36	\$42	\$50	\$59

GREAT DIVIDE INSURANCE COMPANY
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III. WHOLE DOLLAR RULE

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- A. any amount involving \$.50 or over shall be rounded to the next highest whole dollar amount; or
- B. any amount involving \$.49 or less shall be rounded down to the next lowest whole dollar amount.

IV. ADDITIONAL PREMIUM CHARGES

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- B. Apply the rates and rules that were in effect at the inception date of this policy period. After computing the additional premium, charge the amount applicable from the effective date of the change, even if the policy inception premium was less than the policy writing minimum premium (if applicable).
- C. Waive additional premium of \$10.00 or less (not applicable in KS, NH & WA).

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OPTOMETRISTS PROFESSIONAL LIABILITY INSURANCE PROGRAM
COUNTRYWIDE RATES/RULES MANUAL

Part 1 – General Rules

V. RETURN PREMIUM

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- C. Cancellation initiated by the insured will be canceled pro-rata less a penalty of 10% (7.5% for AK) unless coverage is concurrently rewritten by the Company, in which case no penalty shall be applied.

VII. COVERAGES

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Professional Liability and General Liability
Professional Liability only

Note: General Liability cannot be purchased on a stand-alone basis.

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OPTOMETRISTS PROFESSIONAL LIABILITY INSURANCE PROGRAM
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Part 1 – General Rules

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- A. Compute the premium at policy inception using the rules, rates, and rating plans in effect at that time. At each renewal, compute the premium using the rules, rates, and rating plans then in effect.
- B. Prorate the premium when a policy is issued for less than a whole year.
- C. Premiums are calculated as specified for the respective coverage. Premium rounding will be done at the end of the computation process in accordance with the Whole Dollar Rule.

Available coverages under this program are:

- a. Professional Liability:

Premium is computed by multiplying the appropriate rate for each optometrist by the number of insured optometrists. If a separate limit of liability is desired for the entity, the total insured count is increased by one. The sum of these products is the total professional liability premium.

- b. General Liability Premium:

Premium is equal to the applicable rate for the first covered location if only one location is covered. Additional location premium is calculated by multiplication of the rate for additional locations by the number of covered locations less one. The premium is the sum of this product and the first location rate. This calculation is given in the following formula:

$$P = r_1 + [r_2 * (n-1)]$$

Where P is the general liability premium, r_1 , is the first location rate, r_2 , is the additional location rate, and n is the total number of locations. Regardless of the number of locations covered, the limit of liability is shared among all covered locations.

- c. Additional Insured Premium:

Premium is computed by multiplying the applicable rate by the number of additional insureds under the policy.

- d. Policy Premium:

The sum of the premiums developed by rules: a, b. and c. above is the policy premium.

GREAT DIVIDE INSURANCE COMPANY
OPTOMETRISTS PROFESSIONAL LIABILITY INSURANCE PROGRAM
COUNTRYWIDE RATES/RULES MANUAL

Part 1 – General Rules

IX. FACTORS OR MULTIPLIERS

Wherever applicable, factors or multipliers are to be applied consecutively and not added together.

A. Additional Limit

Group practices or sole practitioners may purchase a separate limit of liability for the entity. The entity premium is equal to the per optometrist premium.

B. Exposure Reduction

1. Students: Optometry students will pay 50% of the rate for optometrists while they are completing their training or beginning their first year of practice.
2. Second Practice Year: Reduced rates apply to individual optometrists who graduated within one year prior to the policy effective date. The rate for such professionals shall be 75% of the rate shown on the rate page.
3. Part-time Practice: Part-time rates apply to optometrists practicing 20 or fewer hours per week. The part-time rate is 75% of the standard rate for a full-time optometrist.
4. Shared Limits: Group practices may purchase a policy under which the entity and all professionals share the same limit of liability. The standard rate for professionals and the entity will be discounted 25% for this type of arrangement.

The lowest rate for which an insured qualifies will apply.

C. Group Discount

A premium credit is available based on the size of the group when coverage is purchased. All members of the group practice must be insured under the policy to be eligible for the discount. Credits apply as follows:

Groups of 2 – 9 optometrists	4% Credit
Groups of 10 or more optometrists	8% Credit

A group credit is not available to groups that chose to share a limit of liability.

GREAT DIVIDE INSURANCE COMPANY

OPTOMETRISTS PROFESSIONAL LIABILITY INSURANCE PROGRAM

COUNTRYWIDE RATES/RULES MANUAL

Part 2 – Rating Rules

I. PROFESSIONAL LIABILITY RATES

Rating Territory Code	Territory Description	\$100K/\$300K	\$250K/\$750K	\$1M/\$3M	\$2M/\$4M
CW1	AL, AK, AZ, AR, DE, GA, HI, ID, IN, IA, KS, KY, ME, MD, MS, MT, NE, NH, NC, ND, OH, OK, OR, RI, SC, SD, TN, UT, VT, VA, WA, WV, WI, WY			\$451	\$528
CW2	CO, MN, MO, NV			\$580	\$679
CW3	CT, DC			\$1,509	\$1,766
CA1	California – excluding Los Angeles County			\$420	\$491
CA2	California – Los Angeles Cty.			\$644	\$754
FL1	Florida – excluding Dade and Broward Counties			\$692	\$810
FL2	Florida – Dade & Broward Cty.			\$1,710	\$2,001
IL1	Illinois – excluding Cook Cty.			\$603	\$705
IL2	Illinois – Cook County			\$932	\$1,091
IN	Indiana – Special Limit for Comp Fund Participants		\$308	\$451	\$528
LA	Louisiana	\$503		\$957	\$1,120
MA1	Massachusetts – excluding Norfolk and Suffolk Counties			\$603	\$705
MA2	Massachusetts – Norfolk and Suffolk Counties			\$858	\$1,004
MI1	Michigan – excluding Wayne Cty.			\$603	\$705
MI2	Michigan – Wayne County			\$1,509	\$1,766
NJ1	New Jersey – excluding Camden, Hudson, Essex, Mercer and Union Counties			\$540	\$632
NJ2	New Jersey – Camden, Hudson, Essex, Mercer & Union Counties			\$858	\$1004
NM	New Mexico - All			\$420	\$491
NY1	New York – excluding Bronx, Brooklyn, Manhattan, Queens, Staten Island, Nassau & Suffolk			\$420	\$491
NY2	New York – Bronx, Brooklyn, Manhattan, Queens, Staten Island, Nassau & Suffolk			\$1,050	\$1229
PA1	Pennsylvania – excluding Philadelphia County			\$540	\$632
PA2	Pennsylvania – Philadelphia Cty.			\$858	\$1,004
TX1	Texas – except Dallas & Harris			\$603	\$705
TX2	Texas – Dallas & Harris Cty.			\$858	\$1004
VA	Special Limits \$2M/\$6M* - \$731			\$451	\$528

GREAT DIVIDE INSURANCE COMPANY
OPTOMETRISTS PROFESSIONAL LIABILITY INSURANCE PROGRAM
COUNTRYWIDE RATES/RULES MANUAL

II. OPTIONAL COVERAGES

	\$100K/\$300K	\$200K/\$600K	\$50K/\$1M	\$1M/\$3M	\$2M/\$4M
Additional Insureds PL	\$105	\$111	\$129	\$156	\$183
General Liability	\$80	\$85	\$100	\$120	\$140
Additional Locations	\$34	\$36	\$42	\$50	\$59

State:	Illinois	Filing Company:	Great Divide Insurance Company
TOI/Sub-TOI:	11.1 Med Mal-Occurrence Only/11.1019 Optometry		
Product Name:	Optometrists Professional Liability Insurance		
Project Name/Number:	AOA-0003 (2/12)/04-12 Original		

Supporting Document Schedules

		Item Status:	Status Date:
Satisfied - Item:	Explanatory Memorandum		
Comments:			
Attachment(s):			
AOA Rates-Rules Filing Memorandum.pdf			

		Item Status:	Status Date:
Bypassed - Item:	Form RF3 - (Summary Sheet)		
Bypass Reason:	Does not apply.		
Comments:			

		Item Status:	Status Date:
Satisfied - Item:	Certification		
Comments:			
Attachment(s):			
Certification.pdf			

		Item Status:	Status Date:
Satisfied - Item:	Manual		
Comments:	Complete new manual attached to Rate/Rule Schedule tab.		

		Item Status:	Status Date:
Satisfied - Item:	Filing Authorization		
Comments:			
Attachment(s):			
Great Divide Authorization Letter.pdf			

GREAT DIVIDE INSURANCE COMPANY

Optometrists Professional Liability

Filing Memorandum – Rates/Rules

On behalf of Great Divide Insurance Company (“Great Divide” or “The Company”), we are filing new, independent rates and rules for its Optometrists Professional Liability Program. The program will provide medical malpractice and general liability coverage on an occurrence basis for optometrists.

A corresponding forms filing is also being submitted for this program.

The attached rate pages provide the corresponding rate by state for optometry practitioners. We are also attaching the rules that will be used with regard to the rating of policyholders in your state. We believe the rules to be in compliance with your state requirements.

Since this is a new program, the company does not have historical experience from which to determine rates. Therefore, the company has relied on what it believes to be in force rates for similar programs underwritten by Liberty Insurance Underwriters, Inc and PACO Assurance Company. Exhibit 1 provides a comparison of the proposed Optometrists Professional Liability and General Liability rates versus those of the referenced carriers.

The rates shown in Exhibit 1 are further modified in instances of part time employment or group based purchases. A comparison of the adjustment factors is provided in Exhibit 2. The company considers the proposed rating plan to be adequate, but not excessive nor unfairly discriminatory.

The permissible loss ratio for this new program is established in Exhibit 3 and is based on medical malpractice business written within the W.R. Berkley Corporation of which Great Divide is a member. A broader base of experience was considered as Great Divide writes less than \$1M of medical malpractice premium annually. The anticipated profit underlying the permissible loss ratio is documented in Exhibit 4 and also considers the W.R. Berkley Corporation results.

GREAT DIVIDE INSURANCE COMPANY

Optometrists Professional Liability

Illinois Certification for Medical Malpractice Rates

(215 ILCS 5/155.18)(5) states that medical liability rates shall be certified in such filing by an officer of the company and a qualified actuary that the company's rates are based on sound actuarial principles and are not inconsistent with the company's experience.

I, Sandra Nelson, an officer of Great Divide Insurance Company, am authorized to certify on behalf of the Company making this filing that the company's rates are based on sound actuarial principles and are not inconsistent with the company's experience. Optometrists Professional Liability is a new program for the company with rates comparable to those of other insurance carriers writing in the state that have been developed using sound actuarial principles.

I, Linda Saunders, ACAS and Executive Actuary of Berkley Select, LLC, certify that the company's rates are based on sound actuarial principles and are not inconsistent with the company's experience. Optometrists Professional Liability is a new program for the company with rates comparable to those of other insurance carriers writing in the state that have been developed using sound actuarial principles.

 Secretary

June 28, 2012

Signature and Title of Insurance Company Officer

Date



6/28/12

Signature and Title of Insurance Company Actuary

Date



NAUTILUS INSURANCE GROUP

Nautilus Insurance Company

Great Divide Insurance Company

April 18, 2012

RE: Great Divide Insurance Company
NAIC# 098-25224
FEIN: 45-0397186

To Whom It May Concern:

Monitor Liability Managers, LLC is hereby authorized to submit rate, rule, and form filings on behalf of **Great Divide Insurance Company**. This authorization includes providing additional information and responding to questions regarding the filings on our behalf as necessary. This authorization is deemed in be in effect until rescinded in writing.

Please direct all correspondences and inquiries related to this filing to Monitor Liability Managers, LLC at the following address:

Monitor Liability Managers, LLC
2850 West Golf Road, Ste. 800
Rolling Meadows, IL 60008
Attn: Compliance Department

Tel: (847) 806-6590
Fax: (847) 806-6282

Please contact me at (800) 446-2100 if you have any questions regarding this authorization.

Sincerely,

Sandra C. Nelson
Assistant Secretary
Great Divide Insurance Company